## FORM D

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# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

#### FORM D

Washington, D.C. 20549

OMB Number Expires: April 30, 2008 Estimated average burden 16.00 hours per response ......

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix	Serial					
DATE RECEIVED						
	<u></u>					

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Limited Partnership Interests of Lime Rock Partners V, L.P.								
Filing Under (Check box(es) Type of Filing: New		Rule 504 Amendment	Rule	505 🖾 Rul	e 506	Section	on 4(6)	ULOE
		A. BAS	IC IDENT	IFICATION DAT	'A			
1. Enter the information req	uested about the	issuer				· •		
Name of Issuer ( check if t Lime Rock Partners V, I		nent and name has	s changed, a	and indicate change	e.)	4		
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Numt c/o Lime Rock Management LP, 518 Riverside Ave, Westport, Connecticut (203) 293-2750								
Address of Principal Business (if different from Executive C		(Number a	nd Street, C	in PROCE	SSED	none Numb		8046001
Brief Description of Business Private Equity Investment 1				APR 30	2008			
Type of Business Organization corporation business trust	on Iimited partne	ership, already for		HOMSON R  other (please s partnershi			nds exempte	d limited
Actual or Estimated Date of I Jurisdiction of Incorporation		(Enter two-le		Year  08 ostal Service abbrevother foreign jurisd			Estimated	

#### **GENERAL INSTRUCTIONS**

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

SEC 1972 (6-02)

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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## A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
  - Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
  - Each general and managing partner of partnership issuers.

Check Box(es) that Apply: Promoter [ *the "General Partner"	Beneficial Owner	Executive Officer	Director			
Full Name (Last name first, if individual)			,			
Lime Rock Partners GP V, L.P.						
Business or Residence Address (Number and	Street, City, State, Zip C	Code)				
Maples Corporate Services Limited, Uglan	d House, P.O. Box 309	GT, George Town, Gra	nd Cayman, C	ayman Islands		
Check Box(es) that Apply:  Promoter [	Beneficial Owner	Executive Officer	Director	★ General and/or		
*"the General Partner of the General	Partner"			Managing Partner		
Full Name (Last name first, if individual)						
LRP GP V, Inc.						
Business or Residence Address (Number and	Street, City, State, Zip C	Code)	<del>'</del>			
Maples Corporate Services Limited, Ugland	d House, P.O. Box 309	GT, George Town, Gra	nd Cayman, C	ayman Islands		
Check Box(es) that Apply: Promoter *Director of the General Partner	Beneficial Owner eneral Partner	Executive Officer	<b>⊠</b> * Director	General and/or Managing Partner		
Full Name (Last name first, if individual)						
Farber, Jonathan						
Business or Residence Address (Number and 518 Riverside Ave. Westport, Connecticut		Code)				
Check Box(es) that Apply: Promoter [ *Director of the General Partner of the Ge	Beneficial Owner eneral Partner	Executive Officer	<b>⊠</b> * Director	☐ General and/or Managing Partner		
Full Name (Last name first, if individual)						
Reynolds, John						
Business or Residence Address (Number and	Street, City, State, Zip C	Code)				
518 Riverside Ave. Westport, Connecticut	06880					
Check Box(es) that Apply: Promoter * Chief Financial Officer and Secretary of the Chief Financial Officer and Secretary of the Chief Financial Officer and Secretary of the Check Box(es) that Apply: Promoter * Check Box(es) that Apply	Beneficial Owner the General Partner of	★ Executive Officer     the General Partner	Director	General and/or Managing Partner		
Full Name (Last name first, if individual)						
McCall, Mark A.						
Business or Residence Address (Number and 518 Riverside Ave. Westport, Connecticut	•	Code)				
Check Box(es) that Apply:	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner		
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
Check Box(es) that Apply:  Promoter [	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if individual)						
Business or Residence Address (Number and Street, City, State, Zip Code)						
(Use blan	nk sheet, or copy and us	e additional copies of this	sheet, as necess	sary)		

<u> </u>					
B. INFORMATION ABOUT OFFERING	<del></del>	s No			
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?					
Answer also in Appendix, Column 2, if filing under ULOE.					
2. What is the minimum investment that will be accepted from any individual?	\$ <u>5</u>	<u>*000,000</u>			
*The minimum investment is \$5 million. The General Partner reserves the right to accept investments of a lesser amount.					
3. Does the offering permit joint ownership of a single unit?	Ye ⊠				
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or sim remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associate person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If m than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker dealer only.	ated nore				
Full Name (Last name first, if individual)					
Business or Residence Address (Number and Street, City, State, Zip Code)					
Name of Associated Broker or Dealer					
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers					
(Check "All States" or check individual States)	•••••	All States			
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [IN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]					
Full Name (Last name first, if individual)					
Business or Residence Address (Number and Street, City, State, Zip Code)					
Name of Associated Broker or Dealer					
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers					
(Check "All States" or check individual States)	•••••	All States			
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]					
Full Name (Last name first, if individual)					
Business or Residence Address (Number and Street, City, State, Zip Code)					
Name of Associated Broker or Dealer					
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers					
(Check "All States" or check individual States)					
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]					

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	S AND USE OF PROCEE	.03
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	· ·	\$
	Equity		\$
	☐ Common ☐ Preferred	Ψ	Ψ
		¢	er.
	Convertible Securities (including warrants)		
	Partnership Interests		\$ <u>1,300,000,000</u>
	Other (Specify)		
	Total	\$ <u>1,400,000,000</u>	\$ <u>1,300,000,000</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	100	\$1,300,000,000
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		
	Answer also in Appendix, Column 4, if filing under ULOE.		<u> </u>
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		<b>\$</b>
	Printing and Engraving Costs		] \$
	Legal Fees	<u> </u>	\$100,000
	Accounting Fees		] \$
	Engineering Fees	[	] \$
	Sales Commissions (specify finder's fees separately)	E	] \$
	Other Expenses (identify)		] \$
	Total		] \$
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C – Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		\$1,399,900,000
	<del>-</del>		

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

5.	Indicate below the amount of the adjusted gross proceed proposed to be used for each of the purposes shown, purpose is not known, furnish an estimate and check the estimate. The total of the payments listed must equip proceeds to the issuer set forth in response to Part $C-Q$					
				Payments to Officers, Directors, & Affiliates	Payments to Others	
	Salaries and fees			8	<b>\$</b>	
	Purchase of real estate	***************************************		<b>S</b>	□ <b>s</b>	
	Purchase, rental or leasing and installation of machinery	and equipment		<u> </u>	□ \$	
	Construction or leasing of plant buildings and facilities			\$	<b>\$</b>	
	Acquisition of other businesses (including the value involved in this offering that may be used in exchange of securities of another issuer pursuant to a merger)	g that may be used in exchange for the assets		\$	□ \$	
	Repayment of indebtedness	***************************************		\$		
	Working capital			<b>S</b>		
	Other (specify): Investment Capital			\$		
Column Totals  Total Payments Listed (column totals added)						
	D. FEDE	RAL SIGNATURE				
followi	uer has duly caused this notice to be signed by the under ng signature constitutes an undertaking by the issuer to of its staff, the information furnished by the issuer to any	furnish to the U.S. See	curitie	s and Exchange Con	mission, upon written	
Issuer ( Lime F	Signature //	1 M	Date 4/21/08			
	of Signer (Print or Type) A. McCall	Title of Signer (Print or Type)  Chief Financial Officer and Secretary of LRP GP V, Inc., the General Partner of Lime Rock Partners GP V, L.P., the General Partner of the Issuer, Lime Rock Partners V, L.P.				

END

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)